

S/N 10/072,605



PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Michael J. Renn et al. Examiner: Julian D. Huffman  
Serial No.: 10/072,605 Group Art Unit: 2853  
Filed: February 5, 2002 Docket: ODC2000-1-CIPB  
Title: Direct WriteTM System

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**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the referenced materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicants respectfully request that this Supplemental Information Disclosure Statement be entered and the document listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicants request that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicants with the next official communication.

The cited reference was made known to the Applicants in an Office Action issued by the U.S. Patent Office on April 18, 2005, regarding a co-pending U.S. application. This Supplemental Information Disclosure Statement is being filed within three months of knowledge of the reference cited. Therefore, no fee or certification is required. 37 C.F.R. § 1.97(e).

The Examiner is invited to contact the Applicants' Representative at the below-listed telephone number if there are any questions regarding this communication.

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Respectfully submitted,

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Date June 20, 2005

By

  
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Reg. No. 56,721

**CERTIFICATE UNDER 37 CFR 1.8:** The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Mail Stop: AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 20th day of June, 2005.

Philip D. Askenazy, Reg. No. 56,721  
Name

  
Signature

Substitute for form 1449A/PTO <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>		<i>Complete if Known</i> 	
		<b>Application Number</b>	10/072,605
		<b>Filing Date</b>	February 5, 2002
		<b>First Named Inventor</b>	Renn, Michael
		<b>Group Art Unit</b>	2853
		<b>Examiner Name</b>	Julian D. Huffman
Sheet 1 of 1		Attorney Docket No: ODC2000-1-CIPB	

**US PATENT DOCUMENTS**

Examiner Initial *	Cite No. *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US-5,844,192	12/01/1998	Wright, Robert J., et al.	

**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No. *	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>2</sup>
		Country Code – Number – Kind Code (If known)				

**OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
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**EXAMINER****DATE CONSIDERED**

Substitute for form 1449A/PTO <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> (Use as many sheets as necessary)		JUN 23 2005 CIPB	
		Complete if Known	
		<b>Application Number</b>	10/072,605
		<b>Filing Date</b>	February 5, 2002
		<b>First Named Inventor</b>	Renn, Michael
		<b>Group Art Unit</b>	2853
		<b>Examiner Name</b>	Julian D. Huffman
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EXAMINER \_\_\_\_\_ DATE CONSIDERED \_\_\_\_\_

Substitute Disclosure Statement Form (PTO-1449)

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached